

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No. 66138-0005	
	First Inventor Hatem Hannawa	
	Title RE-USABLE NON-METALLIC CONSTRUCTION FORMING SYSTEM	
	Express Mail Label No. EV223959944US	

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing) See 37 CFR 1.27.</small>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>		
3. <input checked="" type="checkbox"/> Specification [Total Pages 18] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF)		
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 15]	b. Specification Sequence Listing on: <ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> Paper		
5. Oath or Declaration [Total Sheets] <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small><ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>	c. <input type="checkbox"/> Statements verifying identity of above copies		
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____ <small>Prior application information: Examiner _____ Art Unit: _____</small>			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
19. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number: 10291 OR <input type="checkbox"/> Correspondence address below			
Name	RADER, FISHMAN & GRAUER PLLC Michael B. Stewart		
Address	39533 Woodward Avenue Suite 140		
City	Bloomfield Hills	State	MI
Country	US	Zip Code	48304
	Telephone	(248) 594-0600	Fax (248) 594-0610

Name (Print/Type)	Sonu Nanda	Registration No. (Attorney/Agent)	52,060
Signature	<i>Sonu Nanda</i>	Date	December 12, 2003

Utility Patent Application TransmittalI hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV223959944US,
in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the
date shown below.

Dated: December 12, 2003

Signature: *Jennifer S. Greer* (Jennifer S. Greer)

FEE TRANSMITTAL for FY 2004				Complete if Known																																															
Effective 10/01/2003, Patent fees are subject to annual revision.				Application Number																																															
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27				Filing Date																																															
				First Named Inventor																																															
				Examiner Name																																															
				Art Unit																																															
TOTAL AMOUNT OF PAYMENT (\$)				Attorney Docket No.																																															
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																															
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application, except for Issue Fee. <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				3. ADDITIONAL FEES																																															
FEE CALCULATION																																																			
1. BASIC FILING FEE																																																			
<table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1001</td> <td>770</td> <td>2001</td> <td>385</td> <td>Utility filing fee</td> <td>385.00</td> </tr> <tr> <td>1002</td> <td>340</td> <td>2002</td> <td>170</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003</td> <td>530</td> <td>2003</td> <td>265</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004</td> <td>770</td> <td>2004</td> <td>385</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005</td> <td>160</td> <td>2005</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1)</td> <td>(385.00)</td> </tr> </tbody> </table>				Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	770	2001	385	Utility filing fee	385.00	1002	340	2002	170	Design filing fee		1003	530	2003	265	Plant filing fee		1004	770	2004	385	Reissue filing fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)					(385.00)		
Large Entity		Small Entity		Fee Description	Fee Paid																																														
Fee Code	Fee (\$)	Fee Code	Fee (\$)																																																
1001	770	2001	385	Utility filing fee	385.00																																														
1002	340	2002	170	Design filing fee																																															
1003	530	2003	265	Plant filing fee																																															
1004	770	2004	385	Reissue filing fee																																															
1005	160	2005	80	Provisional filing fee																																															
SUBTOTAL (1)					(385.00)																																														
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																																			
<table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>86</td> <td>2201</td> <td>43</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>290</td> <td>2203</td> <td>145</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>86</td> <td>2204</td> <td>43</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2)</td> <td>(106.00)</td> </tr> </tbody> </table>				Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	18	2202	9	Claims in excess of 20		1201	86	2201	43	Independent claims in excess of 3		1203	290	2203	145	Multiple dependent claim, if not paid		1204	86	2204	43	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					(106.00)		
Large Entity		Small Entity		Fee Description	Fee Paid																																														
Fee Code	Fee (\$)	Fee Code	Fee (\$)																																																
1202	18	2202	9	Claims in excess of 20																																															
1201	86	2201	43	Independent claims in excess of 3																																															
1203	290	2203	145	Multiple dependent claim, if not paid																																															
1204	86	2204	43	** Reissue independent claims over original patent																																															
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																															
SUBTOTAL (2)					(106.00)																																														
**or number previously paid, if greater; For Reissues, see above																																																			
Other fee (specify)																																																			
SUBTOTAL (3)				(0.00)																																															
SUBMITTED BY																																																			
Name (Print/Type)		Registration No. (Attorney/Agent)		Telephone																																															
Sonu Nanda		52,060		(248) 593-3323																																															
Signature		Date																																																	
Sonu Nanda		December 12, 2003																																																	

Fee Transmittal	
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV223959944US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: December 12, 2003	Signature: <u>Jennifer S. Greer</u> (Jennifer S. Greer)

Application No. (if known):

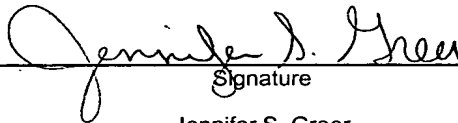
Attorney Docket No.: 66138-0001

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV223959944US in an envelope addressed to:

MS Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on December 12, 2003
Date


Signature

Jennifer S. Greer

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Application Data Sheet